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PART B - FEE(3) I PART B - FEE

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ë 1	appropriate. All further correspondence including the Fairth, and to district indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a maintenance fee modifications.  CURRENT CORRESPONDENCE ADDRESS Office: Use Block 1 for any change of address)				URLICATION FEE (if required). Blocks 1 through 5 should be completed where ication of maintenance fees will be mailed to the current correspondence address as new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittant. This certificate cannot be used for any other accompanying papers, Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
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2/11/20	06 TTRAN2 00000	0099 122252 1071	13951		Mark Sælva	tote	(Depositor's name)	
1 FC:15	01 1400.00 DA			<u>_</u>			(Diste)	
2 FC:15	04 300.00 DA				December	<u>rc &amp; 2006</u>		
ſ	APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO		
•	10/713,951	11/14/2003		Abiola Awujoola		03-1025	6949	
•	title of invention	i: integrated circu	JIT CARRIER APPARA	TUS METHOD AND SY	·			
	APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV, PAID ISSU			
	nonprovisional	NO	\$1400	\$300	<b>5</b> 0	\$1700	01/03/2007	
	EXAM	INER	ART UNIT	CLASS-SUBCLASS	]		·	
	WHITMO	RE, STACY	2825	438-106000				
	CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to 3 registered patent anomeys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered anomey or agent) and the names of up to 2 registered anomey or agent) and the names of up to 3 registered patent attorneys or agents. If no name is listed, no name will be printed.				
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	<del>-</del>							
	Please check the appropriate assignee category or categories (will not be printed on the patent): Individual XX Corporation or other private group entity Government  4a. The following (exts) are submitted:  4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)							
	4a. The following fee(s) are submitted:  XXI Issue Fee  XXI Publication Fee (No small entity discount permitted)  Advance Order - # of Copies			A check is enclosed.	rd Farm PTO-203	8 is anached.	ny deficiency, or credit any nose an extra copy of this form).	
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